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Facsimile: (919) 829-4332****Fax**Date: 2/28/2006**To: USPTO****From: Mary B. Grant****Attention:****Fax: +1.919.829.4332****Direct Phone: +1.919.829.4311****Fax: 571 273 8300****Our Ref.: CMED.10019****Your Ref.: 10/779,721****No. Pages: 6 (incl. this page)****Comments:**

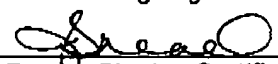
I hereby certify that this correspondence is being transmitted to the United States Patent and Trademark Office facsimile number 571 273 8300 on this the 28th day of February 2006.

Documents enclosed:

Transmittal Letter (in duplicate)	2 pages
Fourth Information Disclosure Statement	2 pages
PTO/SB/08	1 page

Jennie Snead

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

5

Application Number

10/779,721

Filing Date

February 18, 2004

First Named Inventor

Jerry JONN

Art Unit

3763

Examiner Name

Gary Jackson

Attorney Docket Number

CMED.10019

ENCLOSURES (Check all that apply)

☐

Fee Transmittal Form

☐

Fee Attached

☐

Amendment/Reply

☐

After Final

☐

Affidavits/declaration(s)

☐

Extension of Time Request

☐

Express Abandonment Request

☒

Information Disclosure Statement

☐

Certified Copy of Priority Document(s)

☐

Reply to Missing Parts/
Incomplete Application

☐

Reply to Missing Parts
under 37 CFR 1.52 or 1.53

☐

Drawing(s)

☐

Licensing-related Papers

☐

Petition

☐

Petition to Convert to a
Provisional Application

☐

Power of Attorney, Revocation

☐

Change of Correspondence Address

☐

Terminal Disclaimer

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Request for Refund

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CD, Number of CD(s) _____

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After Allowance Communication to TC

☐

Appeal Communication to Board
of Appeals and Interferences

☐

Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

☐

Proprietary Information

☐

Status Letter

☐

Other Enclosure(s) (please identify
below):

Remarks

The Director is hereby authorized to charge any appropriate fees that may be required by this paper, and to credit any overpayment, to Deposit Account No. 50-3218. This paper is submitted in duplicate.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Hutchison Law Group PLLC

Signature

Mary B. Grant

Printed name

Mary B. Grant

Date

2/28/06

Reg. No.

32,178

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Jennie P. Snead

Typed or printed name

Jennie P. Snead

Date

02/28/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/779,721
		Filing Date	February 18, 2004
		First Named Inventor	Jerry JONN
		Art Unit	3763
		Examiner Name	Gary Jackson
Total Number of Pages in This Submission	5	Attorney Docket Number	CMED.10019

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Hutchison Law Group PLLC	
Signature	<i>Mary B. Grant</i>	
Printed name	Mary B. Grant	
Date	2/28/06	Reg. No. 32,176

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Signature	<i>Jennie P. Snead</i>	
Typed or printed name	Jennie P. Snead	Date 02/28/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Patent
Attorney Docket No. CMED.10019

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jerry JONN et al.

Application No.: 10/779,721

Group Art Unit: 3763

Filing Date: February 18, 2004

Examiner: Gary Jackson

Title: Adhesive-Containing Wound Closure
Device and Method

Confirmation No.: 1723

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**FOURTH
INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In accordance with the duty of disclosure as set forth in 37 C.F.R. § 1.56, Applicants hereby submit the following information in conformance with 37 C.F.R. §§ 1.97 and 1.98. A copy of each of the documents cited and required by 37 C.F.R. § 1.98 is enclosed.

To assist the Examiner, the document is listed on the attached form PTO/SB/08. It is respectfully requested that an Examiner initialed copy of this form be returned to the undersigned.

The cited document is being submitted within three (3) months of the filing or entry of the national stage of this application or before the first Office Action on the merits, whichever is later. Since this document is being filed within the time period set forth in 37 C.F.R. § 1.97(b), no fee or statement is required.

Application No.: 10/779,721

Attorney Docket No. CMED.10019
Page 2 of 2

The Director is hereby authorized to charge any appropriate fees that may be required by this paper, and to credit any overpayment, to Deposit Account No. 50-3218.

Respectfully submitted,

HUTCHISON LAW GROUP PLLC

Date: 2/28/06By: Mary B. Grant
Mary B. Grant
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Jennie Snead
(Typed Name of Person Signing Certificate)Jennie Snead
(Signature of Person Signing Certificate)Date of Signing: 02/28/06

PTO/USPSA(06-03)
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Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)	<i>Complete if Known</i>	
	Application Number	10/779,721
	Filing Date	February 18, 2004
	First Named Inventor	JONN, Jerry
	Group Art Unit	3763
	Examiner Name	Gary Jackson
Sheet 1 of 1	Attorney Docket No: CMED.10019	

US PATENT DOCUMENTS			
Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document
	5,902,443	05/11/1999	Kanakubo et al.

FOREIGN PATENT DOCUMENTS				
Examiner Initials*	Foreign Document No	Publication Date	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	Abstract, Translation, English Language Equivalent or Search Report

OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS		
Examiner Initials*	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	Abstract, Translation, English Language Equivalent or Search Report

EXAMINER

DATE CONSIDERED

Substitute Disclosure Statement Form (PTO-1449)

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with new communication to applicant. Applicant's unique citation designation number (optional) Applicant is to place a check mark here if English language Translation is attached